Attorney Docket No.: 19459P-000620US

DECLARATION

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole
inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the
subject matter which is claimed and for which a patent is sought on the invention entitled. ENDOLUMINAL PROSTUFSIS the
specification of which is attached hereto or X was filed on September 22, 1999 as Application No. 09/400.955 and was
amended on (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

	· .	
Application No.	Date of Filing	Status
09/258,542	February 26, 1999	Pending

Full Name of	Last Name:	First Name:	Middle Name or Initial:	
Inventor 1:	KLUMB	KATHERINE	J.	
Residence &	City:	State/Foreign Country:	Country of Citizenship:	
Citizenship:	Los Altos	California	United States	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	12195 Magdalena Avenue	Los Altos	California	94024
Full Name of	Last Name:	First Name:	Middle Name or Initial:	
Inventor 2:	FOGARTY	THOMAS		
Residence &	City:	State/Foreign Country:	Country of Citizenship: United States	
Citizenship:	Portola Valley	California		
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	3270 Alpine Road	Portola Valley	California	94028
Full Name of	Last Name:	First Name:	Middle Name or Initial:	
Inventor 3:	KAMDAR	KIRTI		
Residence &	City:	State/Foreign Country:	Country of Citizenship: United States	
Citizenship:	Sunnyvale	California		
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	692 Thorn Apple Drive	Sunnyvale	California	94806
Full Name of	Last Name:	First Name:	Middle Name or I	nitial:
Inventor 4:	HILL	BRADLEY	В.	
Residence &	City:	State/Foreign Country:	Country of Citizenship: United States	
Citizenship:	Portola Valley	California		
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	3270 Alpine Road	Portola Valley	California	94028

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the

like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Last Fl. KATHERINE J. KLUMB	Thomas J. rogary	KIRTI P. KAMDAR
Date 11/15/99	Date "/15/29	Date 11-15-99
Signature of Inventor 4		·
Gradley S. itil	_	

PA 3032813 v1

Date

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to:
Assistant, Commissioner for Patents, Washington, DC 20231

on of Fetruary, 2001.

Signed: Julia M. Bala

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Katherine J. Klumb et al.

•

Filed: September 22, 1999

Application No.: 09/400,955

Title: ENDOLUMINAL PROSTHESIS

Attorney Docket No.: VASC 1002-3US

(formerly 19459P-000620US)

Examiner: Jonathan D. Goldberg

Group: 3731

Assistant Commissioner for Patents Washington, D.C. 20231

SUBSTITUTION OF ATTORNEY BY ASSIGNEE WITH REVOCATION OF PRIOR POWERS AND CHANGE OF ADDRESS

Sir:

The undersigned ASSIGNEE, of the entire interest in the above-identified application for letters patent, hereby appoints:

Mark A. Haynes - Reg. No. 30,846 Ernest J. Beffel, Jr. - Reg. No. 43,489 James F. Hann - Reg. No. 29,719

to prosecute this application and transact all business in the United States Patent and Trademark Office in connection therewith and hereby revokes all prior powers of attorney

The following chain of title establishes ownership:

An Assignment from the inventors to Avatar Incorporated Vascular Architects recorded on December 13, 1999 at reel 10483 frame 0545.

An Assignment from Avatar Incorporated Vascular Architects to Vascular Architects, Inc. recorded on May 4, 2000 at reel 10841 frame 0123.

Application No.: 09/400,955

Pursuant to 37 C.F.R. 3.73(b) the undersigned Assignee hereby states that evidentiary documents have been reviewed and hereby certifies that, to the best of ASSIGNEE's knowledge and belief, title is in the identified ASSIGNEE.

Direct all telephone calls to Jim Hann, at (650) 712-0340.

Address all correspondence to:

Customer Number 22470

James F. Hann, Esq. HAYNES & BEFFEL LLP P.O. Box 366 Half Moon Bay, CA 94019 (650) 712-0340 (phone) (650) 712-0263 (fax)